



APRIL 2011

A PUBLICATION OF THE IDPH
DIVISION OF BEHAVIORAL HEALTH

STAFF SPOTLIGHT: KEVIN GABBERT



INSIDE THIS ISSUE:

STAFF SPOTLIGHT	1
DIRECTOR'S CORNER	1
DIVISION UPDATES	2
RELATED NEWS	3
TRAININGS AND CONFERENCES	4

IOWA DEPARTMENT OF PUBLIC HEALTH
DIVISION OF BEHAVIORAL HEALTH

Lucas State Office Building
321 East 12th Street
Des Moines, IA 50319
www.idph.state.ia.us



Kathy Stone is Director of the Division of Behavioral Health

Kevin Gabbert is director of Iowa's Access to Recovery (ATR) program. For those not familiar with ATR, the program is funded by SAMHSA's Center for Substance Abuse Treatment and assists individuals recovering from a substance use disorder by funding a wide range of recovery support services. Originally awarded in 2007, Iowa was again selected as an ATR grantee through a competitive application process in 2010. Through ATR, IDPH will receive \$13.1 million over the next four years to fund ATR recovery support services for nearly 10,000 Iowans.

In 2009, the Division of Behavioral Health initiated a transition to a recovery-oriented system of care for addictive disorders — problem gambling and substance abuse prevention and treatment.

Key elements include:

- program licensure
- practitioner credentialing
- workforce development
- client/family leadership
- service areas
- local collaboration
- funding
- services and supports

Kevin has been with IDPH since the start of ATR in 2007. Kevin began his career at the Bridge Counseling Center in Winterset where he worked for 15 years as a treatment counselor and mental health therapist. Kevin also served as the program's director.

His education background includes an Associate Degree in Human Services from DMACC, a Bachelor's Degree in Psychology from Upper Iowa University, and an MSW from the University of Iowa. Kevin is licensed as an LISW and certified as an IAADC.

Although there are times when he misses direct care, Kevin feels that working at IDPH allows him the ability to help individuals in recovery on a larger scale. Many creative things have been made possible by ATR, ranging from funding gas cards so individuals can get

DIRECTOR'S CORNER

- data systems
- outcomes/performance

Currently separate IDPH contracts for substance abuse comprehensive prevention, substance abuse treatment, and problem gambling prevention and treatment end in June 2014. IDPH anticipates release in 2013 of an integrated RFP for local contractors who will together assure coordinated provision of addiction services in designated geographic service areas, effective July 1, 2014.

to treatment to paying for mental health services for co-occurring disorders to introducing new services like Recovery Peer Coaching. Kevin says "It's great to be part of a strong team with all members working toward the same goal — helping people in recovery."

In his free time, Kevin is usually at home with his family. He and his wife have three kids. (Kevin jokes that his wife would tell you she's a single parent of four!) His oldest daughter is a sophomore at Grand View University, his son is a freshman at Johnston, and his youngest, a daughter, is in 6th grade, also in Johnston.

Recently, Kevin started taking guitar lessons. He said if you ever want to hear someone play who has great potential and is truly gifted, don't call him!

You've heard this before, (and some of you are saying "more than once!") So now what? Go to www.idph.state.ia.us/bhsa_rosca.asp and comment on the System Transition Discussion Paper posted there. What do you like? What don't you like? What did we miss? You can also contact me directly. Note: we have new email addresses. The old ones still work but my new address is Kathy.Stone@idph.iowa.gov.

Thanks, Kathy Stone

DIVISION OF BEHAVIORAL HEALTH UPDATES

Governor's Conference on Substance Abuse

The 34th Annual Governor's Conference on Substance Abuse will be held April 5-6 at the Des Moines Convention Center. The theme for this year's conference is ***Best Practices: Taking Action for Prevention, Treatment, and Recovery***. Attendees will hear keynote presentations on "***The Art and Science of Healing***" by C.C. Nuckols, PhD, and "***Whatever Happened to Recovery***" by David Mee-Lee, M.D.

Attendees will also be able to choose from a broad range of breakout sessions on topics such as brain injury services, clinical and leadership skills, colleges and high-risk drinking, disaster behavioral health services, federal healthcare reform, mental health issues, Native American spirituality, pathological gambling, peer-to-peer services, prenatal alcohol exposure, recovery-oriented systems of care and more.

For more information, go to www.trainingresources.org.

Webpage Updates

Check out the new webpages for the Division of Behavioral Health, Bureau of Substance Abuse, and Program Licensure and Regulation. In addition to providing updated general information, the new pages offer a more organized and streamlined site for visitors. Watch for more updates and improvements in the near future.

To see the new Division page, go to <http://www.idph.state.ia.us/bh/default.asp>.

For the new Bureau page, go to http://www.idph.state.ia.us/bh/substance_abuse.asp.

For Program Licensure and Regulation, go to http://www.idph.state.ia.us/bh/admin_regulation.asp.

To let us know what you think, contact kevin.gabbert@idph.iowa.gov.

The New Face of 1-800-BetsOff

You've seen the billboards and the TV messages but have you ever wondered what people get when they call 1-800-BetsOff? Well, we know — behind every call is a trained workforce of counselors to help people "get their lives back" from problem gambling.

1-800-BetsOff has been the focus of a new health promotion campaign introduced last fall. It has also been the focus of a complete redesign of ***1800betsoff.org***. The new website continues to have valuable information about both problem and responsible gambling but it now also has a "What to Expect" video that walks people through the process of calling 1-800-BetsOff and the professional help they can expect to receive. The website also has an "Ask An Expert" section where people who aren't ready to call 1-800-BetsOff can ask a question or make a comment.

In an age when the internet has become *the* place to go for information, it's important to be there as people take that first step to recovery. Please visit the new website and send questions or feedback to Mark Vander Linden at mark.vanderlinden@idph.iowa.gov.

National Guard and ATR

IDPH is pleased to announce that Camp Dodge in Johnston, in collaboration with United Community Services in Des Moines, is establishing an ATR care coordination site for military personnel.

Active military and Guard form a focus population for Iowa's implementation of ATR III. This collaborative effort will help reduce barriers for service personnel trying to access recovery support services. Camp Dodge will be able to offer the same ATR care coordination services as other providers. Nationally, this is the first time ATR services will be provided by the National Guard. SAMHSA will be watching this effort as a possible model for other ATR programs.

Iowa Safe and Supportive Schools Funding

Over the next four years, the Iowa Department of Education (DOE) will receive nearly \$14 million to enhance ***conditions for learning — school safety, student engagement, and the school environment***. Iowa was one of only 11 states chosen to receive funding from the U.S. Department of Education for the Safe and Supportive Schools program. DOE is partnering with IDPH to develop a measurement system for conditions for learning and to reduce substance use and violence in Iowa high schools.

As part of the grant, over 30 Iowa high schools will administer a survey to students, parents, and staff. The student survey will be a customized version of the Iowa Youth Survey constructs that address school safety, student engagement, and overall school environment. Iowa is partnering with the National School Climate Center (NSCC) for the parent and staff surveys.

Iowa's goal is to show improvement in the following measures:

- Percentage of students who report current (30-day) alcohol use
- Percentage of students who report personal harassment or bullying on school property during the current school year
- School "safety scores", and
- Number of suspensions for violent incidents without physical injury

For additional information, contact Dr. Barbara Ohlund at Barbara.Ohlund@iowa.gov or Cyndy Erickson at Cyndy.Erickson@iowa.gov.



RELATED NEWS

HIV Testing Expands to Disproportionately Impacted Populations

Numerous recent studies have described the influence of societal-level forces and structures on elevated rates of HIV and other sexually transmitted diseases (STDs) among African Americans. Although individual behavior (i.e., unprotected sex) is a necessary component in contracting an STD, research shows that African Americans do not vary in the frequency of that or other individual-level behaviors compared to other populations.

The reasons for the higher rates of STDs have more to do with population-level forces. Lower marriage rates (caused by many factors), residential segregation, uneven numbers of men and women, and disproportionate incarceration rates are some of the societal-level forces that contribute to more efficient propagation of STDs among African Americans than among other groups.

In 2009, the Iowa HIV Community Planning Group (CPG), a 40-member community advisory board that works with the IDPH Bureau of HIV, STD, and Hepatitis, studied disproportionate distribution of HIV among African Americans in Iowa. Black, non-Hispanic persons in Iowa account for approximately 4% of the population but make up 20% of persons living with HIV/AIDS in Iowa.

Using research on how these societal-level factors or ***social determinants of health*** affect the transmission of HIV among African Americans, the CPG recommended that IDPH no longer require that African Americans and people from other similarly impacted populations report specific individual-level risk behaviors to be eligible for HIV testing at IDPH-funded counseling and testing sites.

The Bureau implemented the change in 2010. Recent data show that the change has been successful. Last year, HIV testing among African Americans at the sites increased to

27% of all tests, compared to only 16% of all tests in 2007. In addition, African Americans made up 31% of all persons who tested positive at the sites in 2010 compared to only 10% in 2007. The CPG continues to work with the Bureau on how to improve interventions to better address societal-level forces to improve health outcomes for African Americans and other disproportionately impacted groups.

Staff Provide HHS Consultations

Two Bureau of HIV, STD, and Hepatitis staff members have been invited by the U.S. Department of Health and Human Services to participate in consultations related to the recent release of the National HIV/AIDS Strategy by the White House Office of National AIDS Policy.

Caitlin McSweeney, AIDS Drug Assistance Program Coordinator, participated in a discussion on the ethical use of disease data reported to states by health care providers and laboratories. As part of the consultation, Caitlin presented on the Bureau's program that will use reportable data to improve case management outcomes for persons living with HIV/AIDS.

Randy Mayer, Bureau Chief, was asked to participate in two HHS consultations. The first involved development of funding formulas for state HIV prevention cooperative agreements with the Centers for Disease Control and Prevention (CDC). The second, to be held in April, will address development of statewide plans for HIV prevention and care that correspond to the National HIV/AIDS Strategy.

"The invitations reflect recognition of the excellent work that the state and the Bureau have done to address HIV in Iowa," said Kathy Stone, Division Director. "These staff members are among very few nationally who have been asked to voice an opinion based upon successes in our state."

Fast Facts from the Consortium

For this edition of *A Matter of Substance*, the Consortium provided data regarding substance abuse treatment admissions in Iowa for 2010.

of Admissions: 18,785
(68.3% male; 31.7% female)

Age at Admission:

Under 21:	20.6%
21-30:	33.4%
31-40:	21.6%
41-50:	16.1%
51 and over:	8.3%

Race:

White:	88.4%
Black or African American:	8.3%
American Indian or Alaska Native:	1.4%
Asian or Native Hawaiian or Other Pacific Islander:	0.4%
Unknown:	1.5%

Ethnicity:

Hispanic or Latino:	4.8%
Not Hispanic or Latino:	95.2%

Primary Substance at Admission:

Alcohol only:	28.2%
Alcohol with Secondary drug:	22.6%
Marijuana:	27.8%
Amphetamines:	12.6%
Cocaine (smoked):	2.3%
Cocaine (other route):	0.8%
Heroin:	0.9%
Other opiates:	3.6%
Other/Unknown:	1.2%

Source:

Center for Behavioral Health Statistics and Quality, Substance Abuse and Mental Health Services Administration, Treatment Episode Data Set (TEDS)

Watch for more "fast facts" from the ***Iowa Consortium for Substance Abuse Research and Evaluation*** at the University of Iowa.

IDPH Staff Member Receives National Award

Binnie LeHew, Program Coordinator for the Office of Disability, Injury and Violence Prevention, received the **Visionary Voice Award** from the *National Sexual Violence Resource Center*. These awards, offered in conjunction with Sexual Assault Awareness Month each April, recognize the creativity and hard work of individuals around the country who have demonstrated outstanding advocacy and community work to end or prevent sexual violence.

In presenting the award, Beth Barnhill, Iowa CASA, described Binnie as a champion in the movement to end violence against women for most of her professional life. She was the 3rd director of Polk County Victim Services (now Polk County Crisis and Advocacy Services), and since then has served in a variety of roles, from Iowa CASA Board President, to Chair of the State and Territorial Rape Prevention Educators Council, to Chief of the Disability and Violence Prevention Bureau at IDPH.

Despite her many responsibilities, Binnie remains intensely connected to the work done at the community level. Too many times to count, she has stepped in to provide training, dropped what she was doing to serve as a sounding board for a struggling advocate, and explained SMART goals, primary prevention, and logic models over and over again until they almost start to make sense. She never loses sight of the hope that we can end sexual violence, and she fights to make sure we have the resources and support to take the concrete steps we need to get there. *Congratulations Binnie!*

Assessing and Managing Suicide Risk Trainings

The Youth Suicide Prevention Program is co-sponsoring three trainings for anyone working with clients at risk for suicide.

The Assessing and Managing Suicide

Risk (AMSR) training is designed primarily for clinicians who, in the course of their work, make suicide risk level assessments and/or help clients manage suicidal thoughts, feelings and plans.

The all-day training introduces 24 core competencies that behavioral health professionals need to work with individuals at risk for suicide, such as clinical evaluation, formulation of risk, treatment planning, and management. For more information, contact:

- April 11 - Coralville
Jill Weigel
jweigel@aea10.k12.ia.us
- April 14 - Altoona
Cathy Beck-Cross
beckc@se-polk.k12.ia.us
- April 21 - Eldora
Lynn Allbee
lallbee@dhs.state.ia.us)

For more information about AMSR or the Youth Suicide Prevention Program, contact Dale Chell at dale.chell@idph.iowa.gov

Drug Take Back

On April 30, the U.S. Drug Enforcement Administration (DEA) and its community partners will hold the second National Prescription Drug Take Back Day at sites throughout the country. This is an opportunity to prevent pill abuse by ridding homes of potentially dangerous expired, unused, and unwanted prescription drugs through safe disposal.

This initiative addresses a vital public safety and public health issue. Prescription drugs are misused and abused at alarming rates in the United States — more Americans abuse prescription drugs than the number of those using cocaine, hallucinogens, and heroin combined, according to the

[2009 National Survey on Drug Use and Health](#). Many Americans are not aware that medicines that languish in home cabinets are highly susceptible to diversion, misuse, and abuse.

In Iowa, there are dozens of sites across the state that plan to participate. Hours of operation are typically from 10:00am - 2:00pm. For a list of participating locations, visit the DEA website at http://www.deadiversion.usdoj.gov/drug_disposal/takeback/index.html.

TRAININGS AND CONFERENCES

Governor's Conference on Substance Abuse

April 5-6
Des Moines Convention Center.
For more information go to www.trainingresources.org.

Governor's Conference on Public Health

April 5-6
Scheman Conference Center in Ames.
For more information go to <http://www.iowapha.org>

Iowa Drug Endangered Children's Conference

April 11
Prairie Meadows in Altoona.
For more information go to <http://www.blankchildrens.org/classes-and-events.aspx?typeid=27&id=392>

Many Faces of Mental Illness

May 12
Sioux City Convention Center
For more information, contact Kim Fischer-Culver/Siouxland Mental Health Center at 712-202-0173.

For more information about the Division of Behavioral Health, visit

www.idph.state.ia.us/bh

For questions related to "A Matter of Substance," contact the editors:

Kevin Gabbert (kevin.gabbert@idph.iowa.gov) or

Julie Hibben (julie.hibben@idph.iowa.gov)